
Caring For Someone With AIDS

Information For Friends, Relatives,
Household Members, And Others Who
Care For A Person With AIDS At Home



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Centers for Disease Control

CDC

One of the best places for a person with AIDS to receive care is at home, surrounded by those who can provide love and care.

Most people with AIDS can lead an active life for long periods of time. In fact, most of the time a person with AIDS does not need to be in a hospital. A person with AIDS often recovers from AIDS-related illnesses more quickly and comfortably at home with the support of friends and loved ones. Also, home care can help reduce the stress and cost of hospitalization.

Each person with AIDS is different, and is affected by the disease in different ways, and to different degrees. The person's doctor or nurse will keep you updated on the amount and kind of care that is needed. Often, one of the hardest things for a person with AIDS to do is to keep up with the everyday routines of shopping, getting and answering the mail, paying bills, and tidying up. These are the types of roles in which you can play a major part.

What Will You Need To Do?

If you are planning to provide home care for a person with AIDS, you should consider taking a home care course. Contact your local Red Cross chapter, Visiting Nurse Association, or AIDS service agency to find out about home care training offered in your area.

While it's not always possible, it's nice if you can get to know the person's doctor, or at least the nurse, social worker, and other care providers. Work with them to create a plan for home care. Ask them to provide you with clear written instructions regarding medications and procedures. Make sure you know about any adverse reactions to drugs that may occur. Learn whom to call or what to do in the event of an emergency.

Be prepared to keep the doctor or nurse posted of changes if they occur in the person's health or behavior. For example, a cough, fever, diarrhea, or confusion may indicate an infection or

complication that requires special treatment or hospitalization. The doctor or nurse will also let you know about changes in the person's condition which may indicate that home care is not the best option for the person with AIDS.

Providing Emotional Support For The Person With AIDS

It is important to think about the emotional well-being of the person you are caring for. Since every person's emotional needs are different, no single approach is best for everybody.

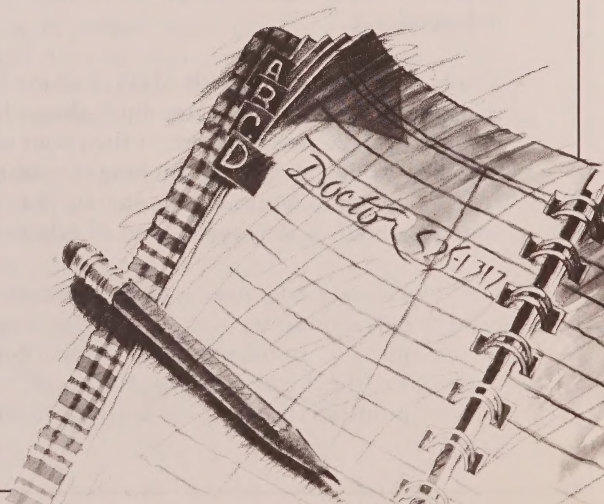
Here are some suggestions for giving emotional support to people with AIDS.

- Encourage the person with AIDS to become involved in his or her own care, set a schedule, and make decisions whenever possible. These actions will provide a sense of control and independence.
- Don't avoid the person with AIDS. Include him or her in activities whenever possible. You don't always have to talk. Your company can be more important than your words. Just having you there while reading or watching television may be appreciated. Allow for quiet time. Like anyone else, he or she may feel anger, frustration, depression, and all other emotions.
- Don't be afraid to discuss the disease. Often, people with AIDS need to talk about it to work out what is happening in their own mind. Offer to help find professional counseling if it is desired. Let the doctors, nurses, and social workers understand your relationship to the person with AIDS, and your role as a caregiver.

- Don't be afraid to touch a person with AIDS. Holding a hand, giving a hug, or giving a back rub can greatly raise the person's spirits. However, be sensitive to people who do not wish to accept physical closeness.

The virus that causes AIDS can damage the brain and cause psychological problems. These problems can include difficulty in thinking clearly and changes in feelings and moods. A common problem for a person with AIDS is dementia. It can result in forgetfulness and poor concentration; slowing down of movements, speech, and thinking; decreased alertness; loss of interest and pleasure in work, and most other activities; and unpredictable or exaggerated changes in mood.

These problems can be very disturbing to the person with AIDS and to others in the home. They can also make it difficult to follow the routines for home care and for protecting the person with AIDS from infection. If these or other psychological problems develop, they should be discussed with the doctor, nurse, social worker, or mental health professional.



Protecting Yourself From Infection With The Virus That Causes AIDS

The virus that causes AIDS is the *human immunodeficiency virus*. You will hear it called by its initials — HIV. Studies indicate that HIV is present in blood, semen, and vaginal fluids of infected persons, and is usually transmitted by

- having sex with a person infected with HIV; or
- using, sharing, or sticking yourself with a needle or syringe that has previously been used by or for a person infected with HIV.

In addition, women infected with HIV can pass the virus to their babies during pregnancy or during birth. In some cases they can also pass it on when breast-feeding. Some people have been infected by receiving blood transfusions, although the risk of infection has been virtually eliminated since careful screening and laboratory testing of the blood supply began in 1985.

You won't get the AIDS virus through everyday contact. You won't get the disease from the air, food, water, insects, animals, dishes, or toilet seats. Because the virus which causes AIDS is found in the blood of infected persons, you should consider blood or other body fluids which contain visible blood (for example, bloody stool) as a potential source of infection. However, in the many instances when health care providers have come in contact with HIV-infected blood, only a small number of HIV infections have resulted. These have all taken place because of needle stick injuries or when blood was splashed on skin that had sores or breaks, or on mucous membranes (mouth, nose, or eyes). *In the absence of sores or breaks, no HIV infections are known to have occurred at all.* The risk of becoming infected with HIV through needle stick injury or blood coming in contact with your

skin is very low. Simple precautions can virtually eliminate this already very small risk. Wear gloves if you may have contact with blood or blood-tinged body fluids. Also, if you have any cuts, sores, or breaks on exposed skin, cover them with a bandage. You will want to wear gloves to clean up articles soiled with urine, feces, or vomit to avoid other germs, even though infections with HIV have not been observed following such contact.

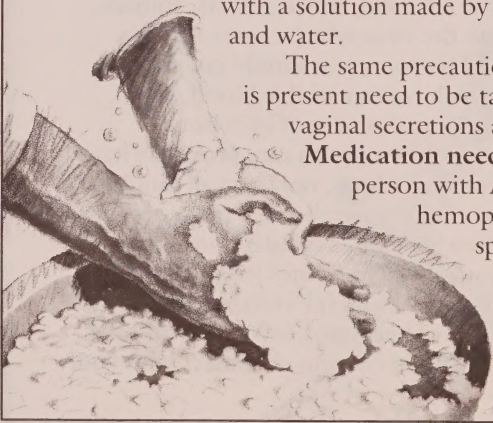
Two types of gloves can be used, depending upon the task. You can use disposable hospital-type gloves to prevent contact with blood when you provide nursing care to a person with AIDS. These gloves should be used once and thrown away. For household chores that involve contact with blood, you may also use household rubber gloves. These gloves can be cleaned, disinfected, and reused. Just make sure they are in good condition. Don't use gloves that are peeling, cracked, or have holes in them.

Always wash your hands with soap and water after any hand contact with blood, even if gloves are worn. In addition to wearing gloves, if large amounts of blood are present, you may want to wear an apron or smock to prevent your clothing from being soiled. If the person with AIDS is bleeding frequently or heavily, contact the doctor or nurse, as home care may no longer be adequate. Remove blood from surfaces and containers with soap and water or a household cleaning solution, then disinfect the area with a solution made by mixing household bleach and water.

The same precautions you take when blood is present need to be taken in the presence of vaginal secretions and semen.

Medication needles may be present if the person with AIDS is diabetic, has hemophilia, or is having other special treatment at home.

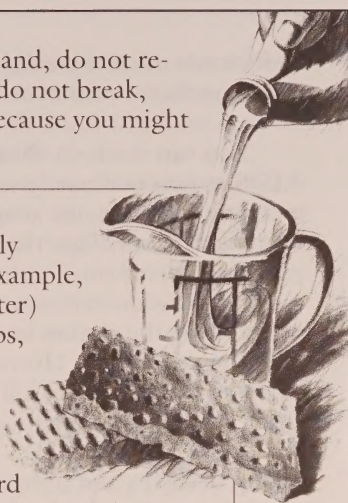
Handle needles carefully to avoid sticking yourself.



- Do not put caps back on needles by hand, do not remove needles from the syringes, and do not break, bend, or otherwise handle needles, because you might stick yourself in the process.

A handy disinfecting solution

A solution of one part bleach freshly diluted with 100 parts water (for example, one tablespoon in one quart of water) can be used on floors, showers, tubs, sinks, and other items, such as mops and sponges. Wear gloves while cleaning up blood, and wash your hands with soap and water after removing gloves. Discard the bleach solution after 24 hours, since it is less effective when it is old. Keep the solution out of the reach of children.



- When you handle a used needle and syringe, pick it up by the barrel of the syringe and carefully drop it into a puncture-proof container. The doctor, nurse, or AIDS service organization can provide you with a container especially made for this purpose. If a special container is not available, you can use any puncture-proof container that has a plastic top, such as a coffee can.
- Keep the disposal container in a room where needles and syringes are used, but well out of the reach of children and visitors.
- Be sure to dispose of the container before it is overflowing with needles. Ask your doctor or nurse about further instructions for disposal of the container.
- If you stick yourself with a used needle, wash the site of exposure thoroughly with soap and water. Then, contact your

doctor as soon as possible to get further evaluation, advice, and, perhaps, treatment.

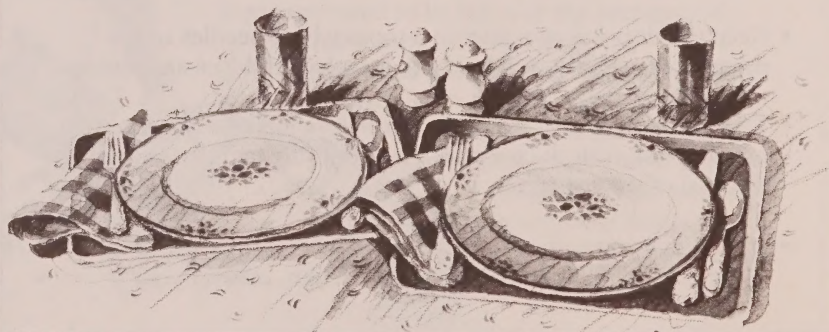
You can wash clothing and linens used by a person with AIDS as you ordinarily would. When using an automatic washing machine, use soap or detergent and either hot or cold washing cycles. Follow the instructions on the soap or detergent package.

If stains due to blood, semen, or vaginal secretions are present, soaking the clothes in cold water and using bleach may help to remove the stains. However, it is not necessary to add bleach to washing machines to kill the virus. Clothes may also be dry-cleaned or hand-washed.

A person with AIDS does not require separate dishes or eating utensils, and dishes used by a person with AIDS do not require special methods of cleaning. They should be washed as you ordinarily would, with soap or detergent and hot water.

A person with AIDS can prepare food for others, provided that he/she does not have diarrhea due to a germ that can be spread by food. It is a good idea for anyone preparing food — including a person with AIDS — to wash his or her hands before beginning.

A person with AIDS should not share razors or toothbrushes because these items sometimes draw blood.



Flush all liquid waste containing blood down the toilet. Be careful to avoid splashing blood when you are pouring liquids into the toilet. Tissues, or other flushable items with blood, semen, or vaginal fluid on them, may also be flushed.

Paper towels, sanitary pads and tampons, wound dressings, and other items soiled with blood, semen, or vaginal fluid that are not flushable should be placed in a plastic bag. Close the bag securely before placing in a trash container. Check with your doctor, nurse, or local health department to be sure you are following trash disposal regulations for your area.

Protecting The Person With AIDS From Infection

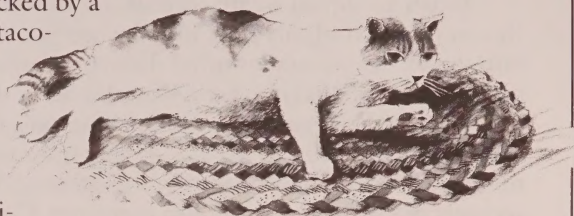
A person with AIDS or AIDS-related illnesses has a difficult time fighting off certain infections. A person with AIDS should avoid close contact with people with contagious illnesses until symptoms have disappeared. That includes diseases such as colds, the flu, or stomach flu (gastroenteritis).

If you have a cold or flu and nobody else is available to provide care, you should wear a surgical-type mask and wash your hands before touching the person with AIDS.

If you have skin infections such as boils, cold sores or fever blisters (*herpes simplex*), or shingles (zoster), you should avoid close contact with a person with AIDS. If such contact is unavoidable, you should keep skin sores covered and wash hands before contact. Wear gloves if you have a rash or sores on your hands.

If there are pets in the house, the person with AIDS should wash his or her hands with soap and water after handling them and especially after cleaning their litter or living areas (such as cages and tanks). This is to protect against infections the animals may carry. Litter boxes should be emptied (not sifted) daily. Pet

birds should be checked by a veterinarian for psittacosis, a disease which may be harmful to a person with AIDS. Sick pets should be checked promptly by a veterinarian. Neither sick pets nor their litter should be handled by the person with AIDS.



Everyone caring for or living with a person with AIDS should consider getting a flu (influenza) shot to reduce the chance of getting the flu and passing the disease on to the person with AIDS. To be effective, flu shots must be taken *every year*.

Everyone caring for or living with a person with AIDS should be up-to-date on all of their “childhood” shots, not only for their own protection, but also to avoid getting any of these diseases outside the home and then transmitting the disease to the person with AIDS.

Even if you believe that you and everybody living with the person with AIDS have had all the recommended childhood shots, ask your doctor if you need any boosters or shots for measles, mumps, or rubella, since these shots may not have been available when you were a child. If the person with AIDS is exposed to measles, contact the person’s doctor within 24 hours. There is a special medicine which, if given promptly, may help to prevent measles in a person with AIDS.

Children or adults who live with a person with AIDS and who need a polio shot should get a special form of polio shot known as “inactivated virus” vaccine. The oral polio vaccine (drops on the tongue or “sugar cube vaccine”) can be dangerous to a person with AIDS.

Chickenpox can make a person with AIDS very sick, and can even be deadly. If the person with AIDS has had chickenpox in the past, he or she will probably not get it again. However, the following precautions should be taken in any case.

- *Under no circumstances* should someone with chickenpox be in the same room with the person with AIDS until all of the chickenpox have completely crusted over.
- Anyone who has recently been *exposed* to chickenpox and who has not yet had chickenpox should not be in the same room as the person with AIDS from the 10th through 21st day after exposure. If it is not possible to stay out of the room, keep the exposure time to a minimum. The exposed person should wear a surgical-type mask and wash hands before providing care.
- Most adults have already had chickenpox, but persons giving care should be especially alert to check whether children who are visiting or living with the person with AIDS and who have not had chickenpox have been recently exposed.
- If you have shingles (zoster), you should not care for the person with AIDS until all the shingles have healed over. This is because contact with shingles can cause chickenpox in a person who has not had chickenpox. If no one else is available to care for the person with AIDS, you should keep the shingles completely covered and wash your hands carefully before providing care.
- If the person with AIDS is exposed to chickenpox or shingles, contact the person's doctor within 24 hours. There is a special medicine which, if given promptly, may help to prevent serious complications from chickenpox in the person with AIDS.

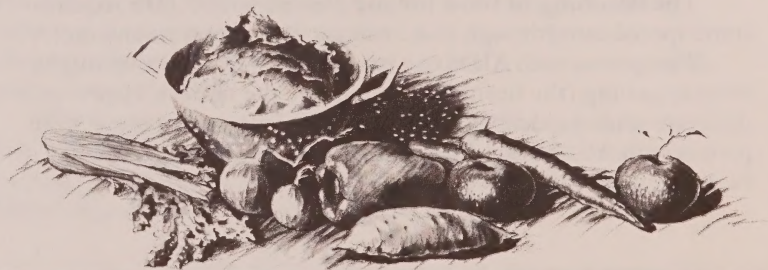
The handling of food for the person with AIDS requires some special care (though these rules actually apply to anyone).

The person with AIDS can eat virtually any food that might seem appealing (the healthier the appetite the better). However, there are some guidelines that need to be followed to protect the person with AIDS from diseases and infections to which they may be susceptible.

- Avoid raw (unpasteurized) milk.
- Never serve raw eggs. Remember that they may be present in homemade mayonnaise, hollandaise sauce, homemade ice cream, fruit “smoothies,” as well as other foods that might seem healthful.
- Meats and poultry should be well-cooked, not pink in the middle. Raw fish or shellfish, as well as raw or undercooked meats and poultry, can also cause problems.

As you can see, it is important that foods are fully cooked. There are also some other precautions you can take during preparation to avoid cross-contamination. This is especially important when you are handling uncooked poultry and meats.

- Wash your hands before handling any food, and between handling different food items.
- Wash all utensils before reusing with other foods.
- Keep uncooked food juices (such as blood from meats, water from shrimp or other seafood) from coming in contact with other foods.
- Use a plastic cutting board rather than a wooden one, because a plastic board is easier to clean.
- Scrub fresh vegetables thoroughly.



Protecting Yourself From Other Infections

A person with AIDS may sometimes have other infections that you and persons who live or visit in the home need to take precautions to avoid catching. Stay in touch with the person's doctor or nurse to find out if he or she develops any other infections and what this means for you and others in the home. This is especially important if you have HIV infection yourself.

For example, diarrhea in a person with AIDS may be caused by an infection (gastroenteritis). You should wear gloves during contact with diarrheal discharge from a person with AIDS and wash your hands carefully afterward. A person with AIDS (or anybody else) who has diarrhea due to an infection should not prepare food for others.

If the person with AIDS has a cough lasting more than a week or two, he or she should see a doctor to be checked for tuberculosis (TB). If the person with AIDS has TB, then you and others who live or visit in the home should be checked several times, even if you are not coughing. Discuss this and other precautions with your doctor, nurse, or local health department.

If the person with AIDS develops acute hepatitis (yellow jaundice) or is a carrier of the *hepatitis B virus*, then you, and any children and adults living with the person, and especially any current or recent sexual partners of the person with AIDS, should ask their doctor about receiving treatment and/or a vaccine to prevent hepatitis.

If the person with AIDS has either chickenpox or shingles (zoster), anyone who has never had chickenpox should not be in the same room. If being in the same room is unavoidable, then you should wear a surgical-type mask, and gloves, and wash your hands before and after providing care. These precautions should be taken until the chickenpox or shingles are completely crusted

over. You should also consult your physician. There is a special medicine which may protect you from serious complications that can result from chickenpox.

If a person with AIDS has fever blisters or cold sores (*herpes simplex*) around the mouth or nose, you should avoid kissing or touching these sores. If you must touch these sores with your hands, wear gloves and wash hands carefully afterward. This is particularly important if you have eczema (allergic skin), since the *herpes simplex virus* can cause severe skin disease in persons with eczema.

Many people with AIDS are infected with a virus called *cytomegalovirus* (CMV) which may be present in urine and saliva. You should wash hands carefully after touching saliva and urine. This is particularly important for someone who may be pregnant, since a pregnant woman who becomes infected with CMV may sometimes transmit this virus to the baby that she is carrying.

Help For The Caregiver

Providing home care can be a stressful and emotional experience. You may feel very frustrated watching a person become sicker despite your efforts. To help cope with feelings of frustration, share your feelings with others, including other caregivers, counselors, clergy, or health professionals. Call your local AIDS service organization for support.

Be sure to arrange for some backup help so you can have some free time occasionally. This is especially important during times when the person with AIDS is very ill. You may need to be relieved of your responsibilities periodically so you can also maintain your energy level.

When caring for a loved one who is very sick, it is important not to ignore your own needs. Unless you take care of yourself, you will not have the inner resources to care for the person with AIDS.

Remember that you are not alone. There are others like you who have gone through this experience before. You can gain knowledge and strength from what they can tell you.

Would You Like More Information?

If you'd like more information about caring for a person with AIDS, if you would like to volunteer, or if you would just like more information about AIDS, contact a doctor, your local health department, your local AIDS volunteer health group, or call 1-800-342-AIDS. The Spanish hotline is 1-800-344-7432. The deaf access hotline is 1-800-AIDS-TTY.



AMERICA
RESPONDS
TO AIDS

Part of the America Responds To AIDS brochure series.

This brochure has been prepared by the

Department of Health & Human Services,

Public Health Service, Centers for Disease Control.

The Centers for Disease Control is the U.S. Government
agency responsible for the prevention and control of diseases,
including AIDS, in the United States.

what you can do

PREVENTING HIV & AIDS



U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
HIV/NAIEP/1-92/013





PREVENTING HIV & AIDS

what you can do

The AMERICA RESPONDS TO AIDS program was created by the U.S. Department of Health and Human Services, Public Health Service, and the Centers for Disease Control (CDC) to inform and educate Americans about HIV infection and AIDS. The Campaign is organized and directed by CDC's National AIDS Information and Education Program (NAIEP). This brochure is from the 1992 campaign, "Americans Working Together To Prevent HIV and AIDS."

- 3 *You Can Make a Difference*
- 4 *Take Action To Protect Yourself*
- 5 *Talk with Your Family and Friends*
- 6 *Support HIV/AIDS Prevention Education in Schools*
- 7 *Get Involved in Your Community*
- 8 *Promote HIV/AIDS Education in the Workplace*
- 9 *Encourage Religious Community Support for HIV/AIDS Prevention*
- 10 *Work with Local Newspapers, Television, and Radio Stations*
- 11 *Where To Go for More Information*
- 12 *Learn the Basic Facts about HIV and AIDS*





“
I'm 19. I've only had two
boyfriends. I live in a
town with a population
of 5,000. I've never
touched drugs, and guess
what? My boyfriend
has HIV and so do I.
I'm living proof that
HIV can happen to
anyone, anywhere.”

— Krista Blake, HIV Positive, Ohio

how does AIDS affect you?

“ You may think that AIDS doesn't affect you. But if you don't know someone infected with HIV, chances are that you will soon.

Approximately 1 million Americans are infected with HIV—about 1 in every 250 people. Each year, as many as 40,000 to 80,000 Americans become infected with HIV.

AIDS can affect anyone: male or female, married or single, young or old, rich or poor, in any community in the country, including smaller cities and towns. This makes AIDS a problem for all of us.

what can one person do?

Every American can get involved in the fight to prevent HIV infection and AIDS. First, educate yourself. Make choices that will keep you healthy—and may even save your life. Then, help others learn about HIV prevention. Together, we can stop one of the country's most serious health problems.

how can you get started?

Getting involved is easy. All you need is a desire to learn and help.

This brochure describes activities that **anyone** can do. You can join or start projects that involve your family, school, community, worksite, congregation, or the media.

To prevent the spread of AIDS, your first priority should be protecting yourself from HIV infection. Understand the disease. Learn and practice safer behaviors. This will help you lead a healthy life.

what you can do:

- **Learn basic facts about how you can and cannot become infected with HIV.** Knowing the facts can help you protect yourself and reduce fears about contracting HIV through casual contact.
- **Assess your personal risk for HIV infection.** Evaluate any current and past sexual and drug-using behaviors. Call the CDC National AIDS Hotline, 1-800-342-AIDS, for a copy of the *HIV Infection and AIDS: Are you At Risk?* brochure.
- **Seek counseling and testing** if you think you could be infected. To find local facilities that provide these services, contact your health department, a local AIDS service organization, or the CDC National AIDS Hotline.
- **Avoid risky behaviors and practice safer sexual behaviors.** You may decide to not have sex or to limit your number of sex partners to one mutually faithful, uninfected person. If your sexual behavior places you at risk, latex condoms used correctly *every time* you have sex can reduce, but not eliminate, the risk of HIV.
- **Be aware of the risks of sharing needles and other drug equipment.** If you use drugs, enroll in a treatment program. Try to quit. If you cannot stop right away, don't share needles or syringes with anyone.
- **Avoid excess alcohol and any use of cocaine, marijuana, and other drugs that may affect your judgment.** Under their influence, you may practice unsafe behaviors, putting yourself at risk of HIV infection.

“
I'm a single mom from New York City. I was a little worried because I'd slept with a lot of people in the past. So I called the CDC National AIDS Hotline to get some general facts about AIDS. They gave me a lot of information over the phone and referred me to a local clinic which offered free counseling and testing. I was lucky—I tested negative. But I'm going to be a lot more careful from now on.
 ”

— CDC National AIDS Hotline Caller



“
*I worry about my
 friends. One guy I
 know was pretty
 serious with someone
 and eventually had sex
 —without a condom. I
 called him, and we had
 a long talk about
 taking chances. I told
 him he's crazy to
 gamble with his life.
 With AIDS around, it's
 better to be safe
 than sorry.*
 ”

— Tom, Illinois

Help your loved ones avoid behaviors that may put them at risk of HIV infection. Share the facts about HIV and AIDS. Just by talking, you may help save their lives.

what you can do:

- **If you are a parent, talk to your children about AIDS.** Explain the risks of using drugs and becoming sexually active. Discuss how to prevent HIV infection and other sexually transmitted diseases (STDs). For advice, call the CDC National AIDS Hotline for an *AIDS Prevention Guide*.
- **Share HIV prevention information with your friends.** Discuss the facts in casual conversations. You may start a discussion by bringing up a news story about AIDS.
- **Discuss HIV infection openly with your sex partner.** You have choices when making decisions about sexual activity.
- **Correct misinformation** about HIV and AIDS. Speak up when family and friends don't know the facts.

Many people with AIDS today were infected with HIV when they were teenagers. And teens often put themselves at risk of other STDs, in addition to HIV. Schools can play an important role in educating our youth about HIV and AIDS. You can work with administrators, school boards, or parent-teacher organizations to start education programs.

what you can do:

- **Find out whether local schools have health education programs.** Make sure education programs contain information about HIV and AIDS and other STDs. If no program exists, encourage that one be adopted.
- **Urge schools to talk with parents** when developing an education program which covers HIV infection. Parents should have input into topics, suitable grade levels for particular issues, and lesson materials.
- **Encourage peer-based programs** that feature teens teaching other teens about STDs, including HIV infection. These have been shown to be effective.
- **Ensure that curricula address drug and alcohol abuse.** Students need to know how these substances impair judgment. Under their influence, teens may put themselves at risk of HIV infection.
- **Urge your school board to adopt an HIV/AIDS policy.** The policy should include guidelines for developing prevention programs and guidelines for students and teachers who are infected with HIV.
- **Organize education events throughout the year focusing on HIV prevention.** Invite guest speakers to discuss the medical and social issues of the disease. Sponsor an AIDS prevention poster, essay, or rap song contest.

“
In 1989, I helped start an AIDS speakers program. As a parent, I had already realized the need for information. My children felt they were not at any sort of risk for HIV infection. So I worked with a local AIDS organization to develop ‘Face to Face.’ The program brings people with AIDS to classrooms. They answer students’ questions about the disease and give AIDS a human face. The speakers are so courageous... they really have an impact on students.
 ”

— Penny, Virginia





“
There was a time in my life when I traveled constantly. When I returned to L.A., I realized that many of my friends had died from AIDS complications. A lot of people hadn't noticed the incredible loss because it happened gradually. To me, it was a sudden blow. That's when I become involved in AIDS Project Los Angeles. I don't have the training to work on a cure through research, but I can make people more aware of the disease through education.
”

— Glenn, California

Thousands of community-based and civic organizations provide HIV prevention education and AIDS-related services. These organizations need community support and volunteers. Join their efforts and help stop the spread of the disease.

what you can do:

- **Volunteer at a local AIDS service organization.** Whoever you are, you have valuable skills. You can become an AIDS education volunteer, provide transportation for patients to their doctors, or share your office skills.
- **Share your unique skills.** You may have experience working with people who have hearing or visual impairments or you may be fluent in a foreign language. Find out if these skills are useful to a local AIDS service organization.
- **Invite a speaker, such as someone with HIV infection or AIDS, to talk with youth groups or adult organizations.** The speaker can personalize the disease and provide facts about HIV prevention. Work with a local AIDS organization to identify a speaker.
- **Ask local AIDS groups to participate in or sponsor special events.** They can provide prevention information or show videotapes at community functions. A group could sponsor an educational display at a school, place of worship, library, or workplace.
- **Encourage local stores and offices to display posters, flyers, or brochures about HIV infection and AIDS.** Express your appreciation to businesses that already display educational information.

More than two-thirds of the American population work outside the home. This makes the worksite an ideal place to offer AIDS education. A defined workplace policy and program can answer questions, correct myths about AIDS, and reduce fear about casual exposure to HIV.

what you can do:

- **Encourage your employer to create a workplace HIV/AIDS policy.** Workplace policies usually cover such topics as employee education, discrimination, hiring and dismissal practices, and employee benefits.
- **Ask your employer to develop an AIDS education program** for all employees. Your local AIDS service organization or Red Cross chapter can provide workplace education materials, including training manuals, videos, and brochures.
- **Organize educational activities** for World AIDS Day (December 1) or a designated AIDS Awareness Week. Urge your company and co-workers to support the activities of local AIDS service organizations.
- **Emphasize family awareness.** Encourage employees and co-workers to educate their families about preventing HIV infection.

Every year, a local AIDS organization holds an AIDS Walk in Washington. I've been involved as a volunteer, and this year encouraged my office to participate in this fundraiser. As a result, 15% of the office walked in the event, and another 40% sponsored the walkers. The money we raised helps to sustain the AIDS prevention efforts, counseling and testing, and social services this organization offers to the community.

— Elizabeth, Washington





“
*I neither condone nor like
the fact that teenagers
engage in sex, but their
behavior should not be a
death sentence. Three
years ago, my church
created Operation
Faithworks. Every week
we hold workshops to
counsel teenagers about
the dangers of AIDS and
the importance of taking
responsibility for their
sexual behavior.*
”

— William P. DeVeaux, Pastor,
Metropolitan A.M.E. Church,
Washington, D.C.

Many people turn to religious communities for support, comfort, and guidance. Places of worship can be excellent sites for HIV and AIDS education. Your congregation may want to support a local AIDS service organization by providing volunteers and other contributions.

what you can do:

- **Urge your religious leaders** to promote compassion and support for people with HIV or AIDS. Support those religious leaders who educate their communities about HIV.
- **Encourage education efforts.** Activities may include distributing brochures and pamphlets on HIV infection and AIDS, writing an article for the congregation publication, or organizing an education program.
- **Start a service program.** Members of your congregation can work with a local AIDS group to offer services. A service program could provide meals, transportation, shelter, or companionship to people with HIV infection or AIDS.

Everyone needs accurate information about HIV infection and AIDS. All of us get information from the media—newspapers and magazines, television and radio. Help make sure that news coverage on HIV and AIDS is factual and complete.

what you can do:

- **Challenge misinformation.** If you notice inaccurate information, express your concern by writing letters or making phone calls to local media.
- **Write letters to the editor.** Tell the media that accurate AIDS education and prevention information is important.
- **Show support for public service.** Radio and television stations often air educational commercials, called public service announcements (PSAs). When you see or hear PSAs about AIDS, call the station and express your appreciation.
- **Express appreciation to news media.** Thank media outlets when they accurately report on HIV and AIDS issues.

“
A good friend of mine has HIV. One night I was watching TV and saw an ad about HIV—how it is and isn't transmitted, with a number to call for more information. I thought it was an effective way to reach a lot of people who might be watching at that time. So I called the station's public information line. I told them I was pleased they were making an effort to help educate the public about this disease. Maybe if my friend had known about the risks, he wouldn't be infected today.”

— Margie, New York





This brochure has been prepared by the Department of Health & Human Services, Public Health Service, Centers for Disease Control, in cooperation with national, state, local, and community-based organizations around the country. The Centers for Disease Control is the U.S. Government agency responsible for the prevention and control of diseases, including HIV infection and AIDS, in the United States.

CDC National AIDS Hotline

The Centers for Disease Control National AIDS Hotline operates toll free, 24 hours a day, 7 days a week. The Hotline offers *anonymous, confidential* AIDS information to the American public. Trained information specialists answer questions about HIV infection and AIDS. They can refer you to appropriate services, including clinics, hospitals, local hotlines, legal services, health departments, counseling and testing sites, support groups, educational organizations, and service agencies throughout the nation. You also can order free publications through the Hotline.

call toll free:

- 1-800-342-AIDS (English)
- 1-800-344-7432 (Spanish)
- 1-800-243-7889 (TDD/Deaf Access)

CDC National AIDS Clearinghouse

The Centers for Disease Control National AIDS Clearinghouse is a comprehensive information and publication distribution source for public health professionals, educators, social service workers, managers of AIDS programs, health care providers, and others. The Clearinghouse maintains four on-line databases that provide information on AIDS service organizations, educational materials, funding sources, and clinical drug trials. Contact the Clearinghouse for additional copies of this brochure or other publications on HIV infection and AIDS. The Clearinghouse also has information about HIV/AIDS service organizations and educational materials.

write:

CDC National AIDS Clearinghouse, P.O. Box 6003, Rockville, MD 20849-6003.

AIDS—Acquired Immunodeficiency Syndrome—is a fatal disease that breaks down the body's immune system. It destroys the body's ability to fight infection and illness.

AIDS is caused by a virus called the Human Immunodeficiency Virus (HIV). By preventing HIV infection, you can prevent AIDS.

There is currently no cure for AIDS and no vaccine to prevent HIV infection.

how can you get HIV?

- Having unprotected sexual intercourse—anal, vaginal, or oral—with an infected person.
- Sharing drug needles or syringes with an infected person.
- From an infected mother to infant during pregnancy, birth, or, in some cases, while breast-feeding.

how can you protect yourself from HIV infection?

- Not having sex.
- Having sex with only one mutually faithful, uninfected partner.
- Not shooting drugs or sharing needles and syringes.

If your sexual behavior places you at risk, latex condoms used correctly every time you have sex can reduce, but not eliminate, your risk.



AMERICA
RESPONDS
TO AIDS

Caring for individuals who are dying forces us to confront death and re-live our past experiences with death (Sanders, 1989). Garfield (1989) suggest that every death opens up al the other deaths we have experiences, each time compounding our sense of loss and our grief, but also compounding our growth.

Scientific advances have affected the definition of death and new moral and ethical issues have emerged as a result (Kastenbaum, 1986). Substance abuse counselors working with recovering addicts dying from AIDS may be called upon to act as the client's advocate and major support source. Given the myriad issues that result from this responsibility and the personal involvement likely to ensue the counselor must have the support mechanisms that will counter chronic work stress, provide an outlet for grief, and validate feelings such as anger, frustration, and impotence before death. Such support is critical to all caregivers, but even more so to the substance abuse counselor in recovery who could be jeopardizing his own recovery process.

Confronting pain management for the substance abuser dying from AIDS-related conditions may, as described earlier, also cause distress to the counselor. On the one hand, the counselor respects the need the client may have of dying "clean and sober," maintaining control of his/her addiction until the end, while also realizing that the client is dying and responding strictly from a humane perspective, asking him/herself, "why worry about addiction at a time like this?" G.P. Swales (personal communication, July 29, 1989) suggests that there may be two separate camps, depending on the counselor's experience with terminal illness and the process of dying; but as previously stated, it is also possible that a counselor's position is more closely related to his/her own experience with substance abuse.

Caregivers working with substance abusers dying from complications related to AIDS are confronted wit the double stigma of such diagnosis; in addition, there is stress in operating within medical systems not used to working with this population and unskilled in caring for dying patients and their families. The substance abuse counselor working in this area is faced with great responsibility and often has to assume an advocacy role, being very alert to treatment decisions and changes, for example, to avoid "accidents" that may result in greater discomfort or emotional stress to their clients (a client being administered an unwanted drug, for example). Making ethical and moral decisions for which there are not guidelines takes a toll on the counselor who is not likely to consider his/her own need for support, yet wonders about such things as decreased energy or loss of appetite, without even considering a connection between his/her own symptoms and the stress of working under such circumstances.

Substance abuse counselors have a responsibility to advocate for their clients, but also have a responsibility to set limits for themselves to prevent burnout. Burnout is defined by Garfield (1989) as a loss of concern for the people we serve and for the work we are doing. It is different from fatigue in that this lack of concern is not resolved by a week of rest or recreation. Garfield (1989) characterizes burnout as the presence of four or five of the following symptoms:

- reduced productivity;
- impaired performance;
- increased opposition to change;
- chronic fatigue, insomnia, bodily aches and pains;
- decreased interest in interacting with co-workers, clients, and their families;
- dislike of work environment;
- expressed dislike for the recipients of services; and
- increased use of formal procedures to process complaints.

He goes on to list the elements that contribute to burnout:

- lack of social support systems in the work arena;
- isolation on the job;
- many difficult and repetitive situations;
- no breaks in action--one thing after another without a change in-between;
- too much direct contact with the recipients of services;
- unrealistic self-expectations--wanting to do it all;
- excessive individual responsibility;
- no self-monitored time out; and
- lack of staff support and collaboration.

Although substance abuse counselors often bear major responsibility for their clients dying from AIDS-related disease, we must remember that empathy does not mean taking total responsibility for the patient's well-being. It means being aware of the limitations under which we operate and being able to discern "the ability to heal that stands separate from medical practices" (Capaldini, 1989, p.2).

Professional caregivers are not expected to grieve the loss of a client and as a result are isolated in their grief. The caregiver is expected to assume the role of the strong person and thus is deprived of the social support normally available to the bereaved. In the case of substance abuse counselors, who often become the principal source of support for the dying individual, this involvement is more intense than it would be if the client had a wider support network. Therefore, the client-counselor bond is stronger, and the death of the client is a loss to the counselor. When these losses occur one after the other, a common experience in this AIDS crisis, the counselor may experience "bereavement overload" and may need therapeutic intervention (Kastenbaum, 1969).

The disease relapse and remission cycles typical of AIDS patients are a significant source of stress for the caregiver who prepares for death again and again, riding the "rollercoaster" along with the client. Caregiver and client often go through some of the same feelings as they confront death. The individual nature of each case precludes the development of specific guidelines, and the caregiver is often left to make decisions and serve as patient advocate as needed--a job that may demand that feelings be set temporarily aside in order to make difficult but very necessary decisions.

Self-awareness and the development of effective support mechanisms are critical to the

emotional survival of the caregiver. This need not be a formal situation, but certainly a support network with which a person can share concerns, express anger, cry, share frustrations, fears, and the like. It could be family, friends, or colleagues, the important thing is to have someone (preferably more than one person) with whom to share feelings- a friend one can call in the middle of the night, even if the call is never actually made.

Dealing with one crisis situation after another and dealing with a dying individual and his/her significant others can provoke an intense need for support and intervention. Garfield (1989) suggests that caregivers get in touch with the child in themselves, using the wisdom of that child, and the openness and clarity with which children are capable of looking at situations in order to self-monitor and prevent burnout. He further points to the need for positive feedback and recommends that we ensure acknowledgment from our supervisors. Having a clear understanding of the structure, functions and priorities of the work environment, he continues, can be critical in helping us maintain realistic expectations.

There may be cases where individual counseling and therapy becomes necessary and the counselor should not hesitate to avail him/herself of it. We need to establish individual and group mechanisms, formal and informal, that provide us the support that is so important to our mental health. Among other things, we should consider:

- engaging in exercise and relaxation;
- engaging in professional/personal growth activities;
- building in "mental health" days;
- varying tasks and sharing responsibility where feasible;
- developing group support mechanisms for dealing with specific, concrete problems;
- identifying institutional forces that favor or do not favor our work;
- learning to isolate ourselves as much as possible from debilitating our influences; and
- having a back-up expert with whom problems can be discussed.

Activities such as staff retreats, case staffings, and case consultations can be very helpful in defusing pressure due to excess responsibilities. We need to learn from each person and from each death, applying that learning to the next situation, thus providing for the growth that is so important for professional satisfaction.

As awareness of the HIV/AIDS-substance abuse connection increases and AIDS service organizations move towards the provision of services for this population, the caregivers involved must assert their rights and promote the creation of support services to promote efficacy and prevent caregiver burnout. We can make a difference for ourselves and we must assume the leadership and guidance others may need to support us.

Support groups for caregivers are emerging in large metropolitan areas and can be easily formed in any setting by concerned individuals simply initiating regular meetings. Groups

may vary in emphasis, a caregivers' bereavement group, for example, has different goals from those of a regular caregivers' support group. The latter would emphasize problem-solving and sharing of information, while the bereavement group would focus on the grief process and the validation of feelings. There could be groups using bibliotherapy, stress therapy, art therapy, dream therapy, or any other approach that the caregivers consider appropriate. The National Institutes of Health (NIH) have a group called "Codependents anonymous for professional caregivers," which is operating on an experimental basis (B. Taylor, personal communication, March 23, 1989).

Taking care of ourselves is not seen as part of the caregivers' "professional plan" and is rarely provided for in the work setting. It behooves caregiving professionals to take action to change things and to plan for services that will make a difference for our emotional and professional survival.

- 10:30 a.m. **AIDS and Grieving**
- o Exercise #3: Provider concerns
 - o Tasks of grieving with AIDS
 - o Worden's tasks
 - o Grief and AIDS
 - o Being with a person with AIDS
 - o Exercise #4: Looking at next steps
- 12:00 p.m. Lunch (on your own)
- 1:00 p.m. **AIDS, Loss and Specific Populations**
- o Women
 - o Children
 - o Communities of color
 - o Gay and bisexual men
 - o Persons with chemical dependency
 - o Health and mental health careproviders
- 1:45 p.m. Refreshment Break
- 2:00 p.m. **AIDS, Families and Loss** (Breakout Sessions)
- 1) Sellers Auditorium (J. Anderson)
 - 2) Central Bank Room (T. Eversole)
 - 3) Birmingham Room (J. Pollatsek)
- 3:30 p.m. Provider Burnout (concluding General Session in Sellers)
- o Exercise #4: The talisman
- 4:00 p.m. Program Evaluation and Adjournment

Sponsored by:
THE UNIVERSITY OF ALABAMA
College of Community Health Sciences
College of Continuing Studies
and
THE COMPASSIONATE FRIENDS, Tuscaloosa Chapter

John R. Anderson, Ph.D.
Thomas G. Eversole, MS
Judith Pollatsek, MA, LISW

AIDS and Grief and Bereavement

January 28, 1993

Paul W. Bryant Conference Center
Sellers Auditorium

AGENDA

8:00 a.m. **Registration and Coffee, Bryant Conference Center**

9:00 a.m. **Welcome and Introductions**

Mrs. Geri L. Stone

Program Director, Division of Professional and
Management Development Programs, College of
Continuing Studies, The University of Alabama

The Reverend James P. Woodson

Chaplain
Episcopal Diocese of Alabama
Tuscaloosa

9:10 a.m. **Loss and HIV Disease**

- o Exercise #1: First experience of loss
- o Overview of HIVD: Medical milestones
- o Issues of loss across the spectrum
- o Discussion
- o Exercise #2: Parallels of loss

The program will be team-taught throughout the day.

John R. Anderson, Ph.D.

Director, AIDS Training Project, American
Psychological Association, Washington, D.C.

Thomas G. Eversole, M.S.

Program Development Officer, HOPE Project, Office
on AIDS, American Psychological Association,
Washington, D.C.

Judith Pollatsek, M.A., L.I.S.W.

Consultant and Psychotherapist, Private Practice,
Washington, D.C.

10:15 a.m. **Refreshment Break**

Sponsors of Grief and Bereavement Conferences of The University of Alabama

- * Alabama Funeral Directors Association Inc.
Alabama Funeral Directors and Morticians Association
Alabama Regional Organ and Tissue Center, Birmingham
B'Nai B'Rith Hillel Foundation, Tuscaloosa
- * Campus Ministry Association, The University of Alabama
- * DCH Regional Medical Center, Tuscaloosa
FOCUS on Senior Citizens, Tuscaloosa
Harco Total Care, Tuscaloosa
Hospice of West Alabama Inc., Tuscaloosa
- * Lodestar Books, Birmingham
New Medico Head Injury System; Lynn, Massachusetts
Ridouts-Brown-Service Inc., Birmingham
State of Alabama, Commission on Aging, Montgomery
- * The Compassionate Friends, Tuscaloosa Chapter
- * The Tuscaloosa Area Alzheimer's Support Group
The University of Alabama, College of Community Health Sciences,
Department of Psychiatry
- * West Alabama AIDS Outreach

Programs

Children and Death: The Impact on Families and Community Systems,
April 1, 1982

Suicide: Prevention, Intervention, & Postvention, November 1, 1985

Grief Counseling Workshop, November 21, 1986

Legal Aspects of Death and Dying, November 12, 1987

Living with Dying, Living with Death, Grief and Bereavement,
November 15, 1988

Coping with Chronic Sorrow: Easing the Burden, November 10, 1989

Anticipatory Grief & Loss: The Perspective of The Patient, The Family,
The Caregiver, January 31, 1991

Understanding and Responding to Complicated Mourning,
November 21, 1991

AIDS & Grief & Bereavement, January 28, 1993

- * Exhibitors/sponsors for "AIDS & Grief & Bereavement"

**Some of
Tuscaloosa's Restaurants**

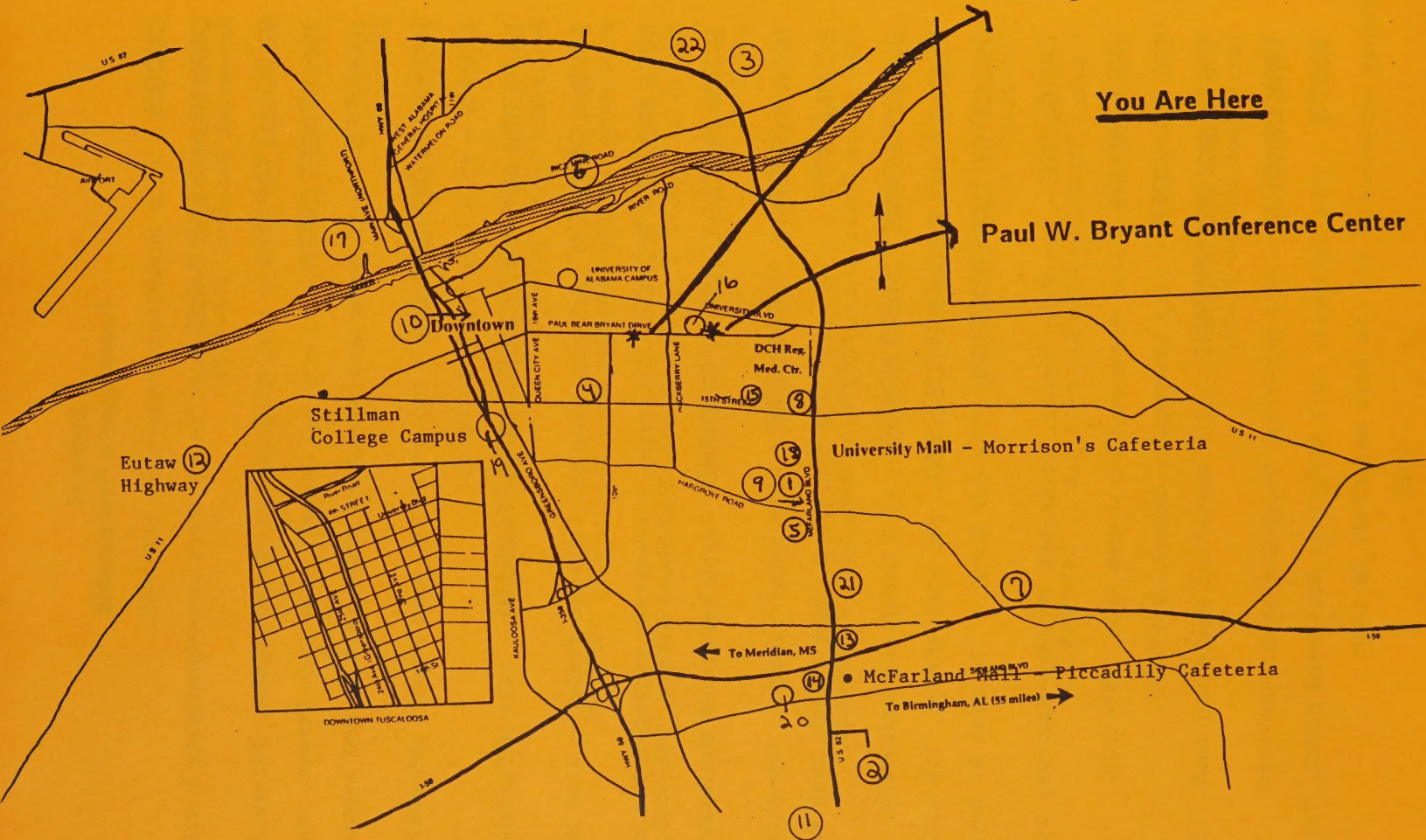
1. **CUCO'S** - 2200 McFarland Boulevard, 345-7552.
2. **DREAMLAND BAR B-QUE** (eat in or carry out--specialty - ribs) - Jerusalem Heights, 758-8135.
3. **EL POLLO TAPATIO** - 1301 McFarland Boulevard North, 391-4861.
4. **15th STREET DINER** - (lunch and dinner) 1036 15th Street, 750-8750.
5. **HARVEY'S** - 2710 McFarland Boulevard East, next to Red Lobster, 553-8466
6. **HENSON'S CYPRESS INN** - 501 Rice Mine Road North, 345-6963.
7. **KOZY'S** - 3510 Loop Road, 556-0665.
8. **LA FIESTA AUTHENTIC MEXICAN RESTAURANT** - 1434 McFarland Boulevard East, 759-2371.
9. **MANNA GROCERY** (Natural, Gourmet & Ethnic Foods) - 2312 McFarland Boulevard (Monday-Saturday 10 a.m.-6 p.m.), 752-9955.
10. **MISS MELISSA'S CAFE** - (includes a breakfast buffet-6-9 a.m.; lunch buffet 11 a.m.-2 p.m. daily) 613 Greensboro Avenue, 758-9555.
11. **MOMA JEWELS COUNTRY COOKING** - 5600 McFarland Boulevard East, 752-7580.
12. **NICK'S ORIGINAL FILET HOUSE** - 4018 Eutaw Highway, 758-9316.
13. **O'CHARLEY'S** - 3799 McFarland Boulevard, next to the Best Western Park Plaza Motor Inn, (brunch on weekends) - 556-5143.
14. **QUINCY'S FAMILY STEAK HOUSE** - 4126 McFarland Boulevard, 349-1909.
15. **RYAN'S FAMILY STEAK HOUSE, INC.**, 220 15th Street, 759-1100.
16. **SHERATON CAPSTONE INN**, (The Oak Room) - 320 Paul W. Bryant Drive, 752-3200.
17. **THE GLOBE** - 430 Main Avenue, Northport (Monday-Saturday 11 a.m.-3 p.m.; Thursday-Saturday 5-11 p.m.), 391-0949.
18. **THE LANDING** - 2100 McFarland Boulevard East, 349-1803.
19. ***THE WAYSIDER** - 1512 Greensboro Avenue, 345-8239.
20. **TREY YUEN RESTAURANT** - 4200 McFarland Boulevard East, 752-0088 (excellent buffet lunch).
21. **TWIN DRAGON** - 3525 McFarland Boulevard East, 556-1727.
22. **WHIT'S** - (The Galleria) 1653 McFarland Boulevard North, 752-2425.

* Highly recommended for the best breakfast in town.

College of Continuing Studies

You Are Here

Paul W. Bryant Conference Center





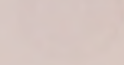
COLLEGE OF CONTINUING STUDIES



COLLEGE OF CONTINUING STUDIES



COLLEGE OF CONTINUING STUDIES



THE UNIVERSITY OF ALABAMA
Some of our
Division of Professional and Management Development Programs

1993

- o Engineer-In-Training Review (Hardaway Hall) January 11-March 22
- o Pulp & Paper Industry Executive Development Institute
(Auburn University and The University of Alabama)..... January 17-29
- o Manufacturing Problem Identification and Resolution..... February 4-5
- o Leadership Tuscaloosa: Leadership In Education,
Economic Development, and the Environment
Location: Bryant Conference Center..... February 10
- o Court Clerks/Magistrates--Orientation I-A..... February 10
- o Sexual Harassment in the Workplace and
Multicultural Diversity..... February 11
- o 38th Real Estate Salesmanship Conference..... February 12-13
- o Addictions Counselor Certification Review Course..... February 17-19
- o City Clerks Certification..... February 18-20
- o Advanced Education Institute..... February 18-20
- o Strategic Planning for Schools..... February 19
- o Southern Company Services..... February 22-26
- o NASA Contract
Fundamentals of Error Control Coding,
Data Compression, and Speech Encoding
Location: Marshall SFC, Ala..... February 22-26
- o Court Clerks/Magistrates--Orientation I-B..... February 24
- o FutureScan
Location: Birmingham-Jefferson Civic Center..... February 24
- o 1993 National Electrical Code Changes Seminar..... February 24-26
- o Implementation of Statistical Process Control
Location: Birmingham-Jefferson Civic Center..... February 25-26
- o Perinatal Challenges in Pregnancy February 26
- o Slashing Your Facility's Utility Bills (Uni-Link)..... March 1-2
- o Motor Fleet Safety for Supervisors..... March 1-3
- o Gas Meter Reading (Riviera Utilities, Foley)..... March 2
- o History and Properties of Gas (Riviera Utilities, Foley)..... March 2
- o Plastic Pipe Installation (Riviera Utilities, Foley)..... March 3
- o The Kaufman Adolescent and Adult Intelligence Test
(KAIT): Administration, Scoring, and Interpretation..... March 3-4
- o Tapping and Stopping (Riviera Utilities, Foley)..... March 4

- o Preconference for Business Reporters: Understanding the
Stock Market and Personal Finance (Alston Hall)..... March 4
- o 1993 Right of Way Conference..... March 4-5
- o Business Reporters (Alston Hall)..... March 5
- o Total Quality Management in Education..... March 5
- o Pulp & Paper Industry Executive Development Institute
(Auburn University and The University of Alabama)..... March 7-19
- o Set-up Reduction--Applications and Techniques
Ramada Inn, Nashville, Tenn..... March 8-9
- o Grants Proposal Development Workshop for Nonprofits..... March 8-9
- o Introduction to Intergraph MicroStation PC..... March 8-12
- o Eastern Coalbed Methane Forum..... March 9
- o Leadership Tuscaloosa:
Leadership In Action: The Legislature
Location: Montgomery..... March 9-10
- o The Management Certificate Program for Supervisors
"Understanding, Motivating and Communicating with People"..... March 9-11
- o Healthcare Cost Containment (Uni-Link)..... March 10-11
- o Court Clerks/Magistrates--Regional Seminars
Location: Holiday Inn, Huntsville..... March 10-11
- o Organizing for Quality..... March 10-12
- o County Administration Workshop..... March 11-12
- o 1993 ADDNET (Attention Deficit Disorders Network)
"In My Class!," Tuesday, 4-6 p.m. EST..... March 16
- o Clay Liners and Covers for Waste Disposal Facilities..... March 18-19
- o Court Clerks/Magistrates--Regional Seminars
Location: Riverview Plaza, Mobile..... March 18-19
- o Court Clerks/Magistrates--Orientation IC, Mobile..... March 20
- o Preconference--Alcohol School:
"Substance Abuse Prevention Programs in
Institutions of Higher Education"..... March 22
- o Preconference--Alcohol School:
"Identification of the Substance Abusing
Pregnant Woman"..... March 22
- o Concurrent Engineering
Sheraton Century Center Hotel, Atlanta, Geo..... March 22-23
- o "A Day for the Ministry"..... March 23
- o 18th Annual Alabama School of Alcohol and
Other Drug Studies..... March 23-26
- o Concurrent Engineering
Birmingham-Jefferson Civic Center, Birmingham..... March 24-25
- o Quality Engineering
Birmingham-Jefferson Civic Center..... March 24-26

- o Purchasing Techniques for Effective Buying..... April 5-6
- o Benchmarking
Sheraton Century Center Hotel, Atlanta, Geo..... April 5-6
- o Alabama Quality Conference
Gulf State Park Resort Hotel, Gulf Shores..... April 5-7
- o Benchmarking
Birmingham-Jefferson Civic Center, Birmingham..... April 7-8
- o Management Skills for Warehouse Supervisors..... April 7-8
- o Court Clerks/Magistrates--Regional Seminars
Location: Governors House Hotel, Montgomery..... April 7-8
- o Revenue Officers Certification..... April 7-9
- o Management Skills for Maintenance Supervisors..... April 12-13
- o CPA Review Course: Accounting Theory..... April 12-17
- o Supplier Certification..... April 13-14
- o Leadership Tuscaloosa:
The Issues of Housing, Welfare and Healthcare
Location: DCH Regional Medical Center..... April 14
- o Management Strategies for Maintenance Strategies..... April 14-15
- o Court Clerks/Magistrates--Regional Seminars
Location: Radisson Hotel, Birmingham..... April 15-16
- o Advanced Workshop for Motor Fleet Supervisors..... April 19-21
- o Sales Management Institute..... April 19-23
- o CPA Review Course: Business Law..... April 19-24
- o Sales Management Institute..... April 19-24
- o CPA Review Course: Accounting Practice..... April 19-May 1
- o 1993 ADDNET (Attention Deficit Disorders Network)
"Try What?," Tuesday, 4-6 p.m. EST..... April 20
- o The Management Certificate Program for Supervisors
"Dealing Successfully with Tough 'People' Issues"..... April 20-22
- o Excellence in Teaching: Principles and Practices
for Nurses in Staff Development and Continuing
Education..... April 23
- o CPA Review Course: Auditing..... April 26-May 1
- o Court Clerks Certification Institute..... April 28-30
- o Success Secrets for Women
Birmingham-Jefferson Civic Center..... April 30
- o NAFEs 3rd Annual Nationwide Satellite Conference
"The Vision is Ours"..... May 1
- o Statistical Methods for Quality Improvement..... May 3-7
- o The Kaufman Adolescent and Adult Intelligence Test
(KAIT): Administration, Scoring, and Interpretation
Location: Holiday Inn at Montgomery Field, San Diego, Cal..... May 5-6
- o Integrating Psychopharmacology Into Nursing Practice..... May 7

- o Managing and Improving Warehouse Operations
Location: Atlanta, Geo..... May 11-12
- o Maintenance and Custodial Management for
Buildings and Facilities
Location: Atlanta, Geo..... May 11-12
- o Leadership Tuscaloosa: Future Directions in Leadership:
What's Next?
Location: Bryant Conference Center..... May 12
- o Leadership Tuscaloosa: Graduation Luncheon Ceremonies
Location: Sheraton Capstone Inn..... May 12
- o CUNA Financial Management School - Part 1..... May 16-21
- o Motor Fleet Maintenance Management..... May 17-19
- o 1993 International Coalbed Methane Symposium
Location: Birmingham-Jefferson Civic Center..... May 17-21
 - o Coal as Source Rock and Gas Reservoir (Short Course)
Location: Birmingham-Jefferson Civic Center..... May 17-18
 - o Evaluation and Financial Management of Oil
and Gas Properties (Short Course)
Location: Birmingham-Jefferson Civic Center..... May 17-18
- o Alabama Electric Cooperative Inc, Andalusia (Contract)
"The Leadership of Change..... May 18
 - o Coalbed Methane Reservoir Engineering (Short Course)
Location: Birmingham-Jefferson Civic Center..... May 18
 - o Completion Techniques for Coalbed Methane Wells (Short Course)
Location: Birmingham-Jefferson Civic Center..... May 18
- o 1993 ADDNET (Attention Deficit Disorders Network)
"Not Alone" Tuesday, 4-6 p.m. EST..... May 18
 - o Origin of Coalbed Reservoirs in the Pottsville Formation
(Field Trip)
Location: Southern and Northern Cahaba Coal Field..... May 21
 - o Introduction to Coalbed Methane Log Interpretation (Short Course)
Location: Birmingham-Jefferson Civic Center..... May 21
 - o Operating in the Global Arena: A Financial Primer
for Coalbed Methane Entrepreneurs (Short Course)
Location: Birmingham-Jefferson Civic Center..... May 21
 - o Gas Research Institute Rock Creek Research Site (Field Trip)
Location: Oak Grove Coalbed Degasification Field..... May 21
 - o Cedar Cove and Brookwood Coal Degasification Fields (Field Trip)
Location: Cedar Cove and Brookwood..... May 21
- o Court Clerks Certification Institute..... May 24-26
- o Southern Company Services..... May 24-28
- o The Management Certificate Program for Supervisors
"Developing Critical Management Skills"..... May 25-27
- o The Legal Aspects of Purchasing..... June 3-4
- o Introduction to Intergraph MicroStation PC..... June 7-11

- o Court Clerks/Magistrates--Orientation II-A..... June 10
- o Communicable Disease/Inoculations/Disease Control..... June 11
- o Anxiety Disorders..... June 15
- o Preventing Employee Lawsuits (Uni-Link)..... June 16-17
- o Records Management Workshop..... June 17-18
- o Maintenance and Custodial Management for
Buildings and Facilities..... June 22-23
- o Taguchi Techniques for Quality Engineering
Sheraton World Resort Hotel, Orlando, Fla..... June 23-25
- o Court Clerks/Magistrates--Orientation II-B..... June 29
- o Managing and Improving Warehouse Operations..... June 29-30
- o The Legal Aspects of Purchasing
Location: Atlanta, Geo..... July 7-8
- o Dysfunctional Families (social work)..... July 13
- o Eastern Coalbed Methane Forum..... July 13
- o Strategic Financial Management for Continuing Educators:
Facilitating the Transformation Toward Self-support..... July 19-23
- o Continuous Quality Improvement: The Medical Staff Model
Birmingham-Jefferson Civic Center..... July 29-30
- o Group Counseling/Therapy (social work)..... August 3
- o Court Clerks/Magistrates--Orientation III-A..... August 5
- o Court Clerks/Magistrates--Orientation IIIC, Mobile..... August 7
- o 3rd Annual Public Policy Institute..... August 11-13
- o Taguchi Techniques for Quality Engineering..... August 11-13
- o State Secretaries Conference, Guntersville..... August 11-13
- o Court Clerks/Magistrates--Orientation III-B..... August 18
- o Addictions Counselor Certification Review Course..... August 18-20
- o Alabama School Superintendents' Executive
Development Institute..... Fall
- o Advanced Purchasing Techniques for
Effective Management..... September 8-9
- o Advanced Purchasing Techniques for
Effective Management
Location: Atlanta, Geo..... September 13-14
- o The Management Certificate Program for Supervisors
"Understanding, Motivating and Communicating with People".. September 13-15
- o Warehousing: Computerization, Automation
& Mechanization..... September 14-15
- o Dual Diagnosis (social work)..... September 15
- o Taguchi Techniques for Quality Engineering
Ramada Inn across from Opryland, Nashville, Tenn..... September 15-17
- o Court Clerks/Magistrates--Orientation IV-A..... September 16

- o Eastern Coalbed Methane Forum..... September 21
- o Warehousing: Computerization, Automation
& Mechanization
Location: Atlanta, Geo..... September 21-22
- o CPA Review Course: Accounting Theory..... September 27-October 3
- o Court Clerks/Magistrates--Orientation IV-B..... September 29
- o IAPES..... September 30-October 1
- o CPA Review Course: Accounting Practice..... October 4-16
- o State Secretaries Conference, Gulf Shores..... October 6-8
- o 12th Annual Retailing Day..... October 12
- o The Management Certificate Program for Supervisors
"Dealing Successfully with Tough 'People' Issues"..... October 18-20
- o CPA Review Course: Auditing..... October 18-23
- o Taguchi Techniques for Quality Engineering
The Harvey Hotel--DFW Airport, Irving, Texas..... October 20-22
- o CPA Review Course: Business Law..... October 25-30
- o 39th Annual Human Resources Management Conference..... October 27-29
- o Polk County School Board (contract)
1-4 p.m., Winter Haven, Fla..... November 5
- o Maintenance Management..... November 9-10
- o The Management Certificate Program for Supervisors
"Developing Critical Management Skills"..... November 15-17
- o Eastern Coalbed Methane Forum..... November 16
- o 28th Annual Municipal Management Training Institute
for City Clerks and Administrators
Location: Sheraton Perimeter, Birmingham..... November 17-19
- o Maintenance Management
Location: Atlanta, Geo..... December 7-8

1994

- o Addictions Counselor Certification Review Course..... February 16-18
- o 19th Annual Alabama School of Alcohol and Other Drug Studies... March 21-25
- o Aggression and Violence in Healthcare..... May 6
- o EnviroMeet '94, Mobile..... July 25-29
- o Addictions Counselor Certification Review Course..... August 17-19
- o 40th Annual Human Resources Management Conference..... October 19-21

1995

- o Addictions Counselor Certification Review Course..... February 15-17
- o 20th Annual Alabama School of Alcohol and Other Drug Studies... March 20-24
- o Addictions Counselor Certification Review Course..... August 23-25

- o IAPES..... October 12-13
- o 41st Annual Human Resources Management Conference..... October 25-27

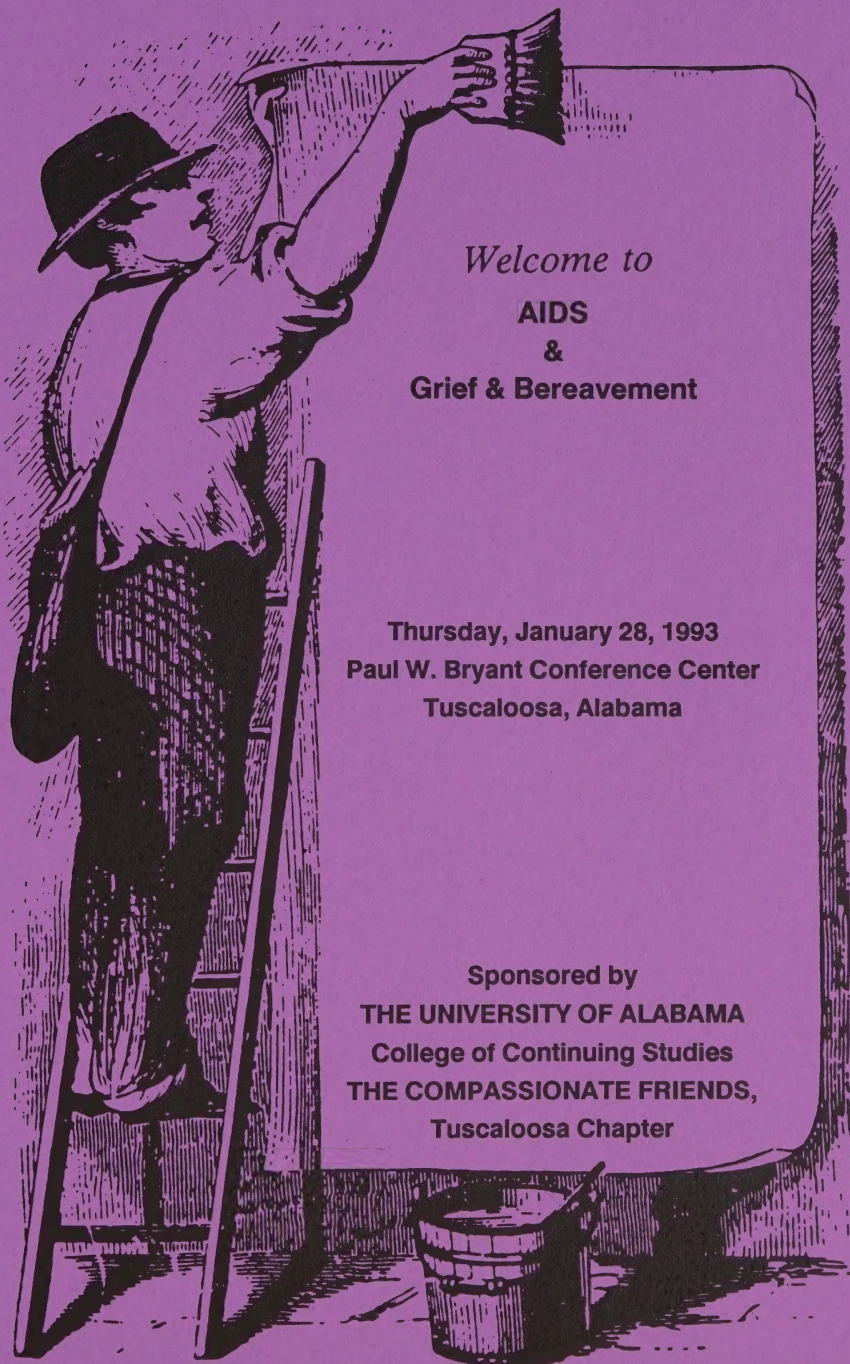
1996

- o Addictions Counselor Certification Review Course..... February 21-23
- o 21st Annual Alabama School of Alcohol and Other Drug Studies... March 18-22
- o Addictions Counselor Certification Review Course..... August 21-23
- o 42nd Annual Human Resources Management Conference..... October 23-25

1997

- o 43rd Annual Human Resources Management Conference..... October 22-24

For more information call (205)348-6222 or write to Division of Professional and Management Development Programs, College of Continuing Studies, The University of Alabama, Box 870388, Tuscaloosa, AL 35487-0388.



Welcome to
**AIDS
&
Grief & Bereavement**

**Thursday, January 28, 1993
Paul W. Bryant Conference Center
Tuscaloosa, Alabama**

**Sponsored by
THE UNIVERSITY OF ALABAMA
College of Continuing Studies
THE COMPASSIONATE FRIENDS,
Tuscaloosa Chapter**

THE UNIVERSITY OF ALABAMA
SCHOOL OF SOCIAL WORK

APPLICATION FOR SOCIAL WORK CONTACT HOURS

To apply for Social Work Contact hours you must return this form along with a check or money order in the amount of \$5.00 and payable to The University of Alabama. The completed form and payment should be sent to: Dr. Richard T. Crow, The University of Alabama, School of Social Work, Box 870314, Tuscaloosa, AL 35487-0314. Upon receipt of the completed form and the fee payment of \$5.00 a letter verifying the contact hours received will be sent to the address provided below.

PLEASE PRINT _____ PLEASE PRINT _____ PLEASE PRINT _____

NAME: _____
Last First Middle

HOME ADDRESS: _____

_____ Zip _____

SOCIAL SECURITY NUMBER: _____

NAME OF CONFERENCE/SEMINAR/WORKSHOP: _____
"AIDS & Grief & Bereavement"

LOCATION: The University of Alabama Bryant Conference Center, Tuscaloosa

DATE OF CONFERENCE/SEMINAR/WORKSHOP: January 28, 1993

INDICATE NUMBER OF CONTACT HOURS IN WHICH YOU PARTICIPATED DURING THIS
CONFERENCE/SEMINAR/WORKSHOP: 5.5.

Signature

7/26/91

Sponsored by:

THE UNIVERSITY OF ALABAMA

College of Continuing Studies

College of Community Health Sciences

and

THE COMPASSIONATE FRIENDS, Tuscaloosa Chapter

AIDS & Grief & Bereavement

January 28, 1993

Paul W. Bryant Conference Center

Sellers Auditorium

WELCOME

Welcome to The University of Alabama's continuing education program on "**AIDS & Grief & Bereavement.**" We hope you enjoy the program and our Bryant Conference Center.

PROGRAM SCHEDULE

Please refer to the enclosed program agenda for the day's schedule.

Lunch (on your own) is from noon to 1 p.m. For your convenience, a list of some of Tuscaloosa's restaurants has been included in your packet.

TAX DEDUCTION

Treasury regulations may permit an income deduction for educational expenses (registration fees, travel, meals, and lodging) undertaken to maintain or improve professional skills.

CEU CREDIT

This workshop is a noncredit continuing education activity offered to improve professional skills. The continuing education unit (CEU) has been designed to give recognition to the efforts made by people in approved continuing education programs. This workshop has been approved for 5.5 CEUs.

If you did not originally request a certificate of attendance which lists the CEUs awarded for this workshop, you may still do so by mailing your request to Registration Services, College of Continuing Studies, The University of Alabama, Box 870388, Tuscaloosa, AL 35487-0388. There is a \$5 fee for this service.

PROFESSIONAL CREDIT

The University of Alabama School of Medicine is accredited by the **Accreditation Council for Continuing Medical Education** to sponsor continuing medical education for physicians.

The University of Alabama School of Medicine designates this CME activity for 5 hours in Category I for the Physicians Recognition Award of the American Medical Association.

PSYCHOLOGISTS CREDIT

This program is cosponsored by The University of Alabama and the American Psychological Association HIV Office for Psychology Education. The APA-HIV Office is approved by the APA to offer continuing education for psychologists. The APA-HIV Office maintains responsibility for the program. (6 contact hours)

You will need to sign the appropriate attendance verification form for these various associations which will be made available to you during the afternoon break.

APPROVAL BY OTHER PROFESSIONAL ASSOCIATIONS

Approval has also been received from both the **Alabama Board of Nursing** (Provider #ABNP0222) and the **Alabama State Nurses' Association** (ASNA Provider #5-38.0) for 6.6 contact hours for this program. ASNA is accredited by the Central Regional Accrediting Committee of the American Nurses' Association (ANA), and the ASNA accreditation is reciprocal with all groups using the ANA Accreditation system.

Alabama Board of Examiners of Nursing Home Administrators has approved this program for 5.5 contact hours.

Licensed social workers and professional counselors can receive 5.5 contact hours toward continuing education requirements to maintain licensure with the **Alabama State Board of Social Work Examiners** and the **Alabama Board of Examiners in Counseling**, respectively.

The **Association for Death Education and Counseling** does certify qualified applicants at the levels of Professional Grief Counselor, Professional Death Educator, and an Associate in Bereavement Support and Education. Individuals seeking certification may utilize the credit hours earned at this seminar toward their certification application.

The University of Alabama is an approved education provider by the **National Association of Alcoholism and Drug Abuse Counselors** (NAADAC) (Provider #000141). This seminar has been approved for 5-1/2 contact hours. (Please sign an individual attendance verification form at the end of this seminar. You must submit your own individual documentation of attendance to NAADAC.)

This seminar also has been approved by the **National Board of Certified Counselors** (NBCC) (Provider #3000) for 5.5 contact hours. (Please pick up an individual attendance verification form at the end of the seminar. You must submit your own individual documentation of attendance to the NBCC.)

EVALUATION FORMS

Please complete the evaluation forms before you leave. This information is invaluable to the planning committee. We need your feedback to make sure we are planning the best quality educational program. Your comments and recommendations are vital to help us plan future programs for health, mental health, and other professionals.

BOOKSALE

Please take a moment to stop by and browse through the Lodestar Books' booksale anytime before or after the conference or during break time. The booksale is being provided as a special service to program participants.

ACKNOWLEDGEMENTS

The University of Alabama College of Continuing Studies wishes to thank the following organizations for the educational grants contributed to make this program possible:

Alabama Funeral Director's Association Inc.
Campus Ministry Association, The University of Alabama
DCH Regional Medical Center, Tuscaloosa
Lodestar Books of Birmingham
The Compassionate Friends, Tuscaloosa Chapter
The Tuscaloosa Area Alzheimer's Support Group
West Alabama AIDS Outreach

FOR FURTHER INFORMATION

Questions or comments regarding the program or future programs should be referred to the program director, Geri Stone, who will be available during the breaks as well as before and after the sessions.

Have a good seminar!

HOW TO GET THE MOST FROM THIS PROGRAM

1. Make a goal sheet.

Why did you decide to register for this program? What is it you expect to gain? Take a moment right now to think about your goals. Then clarify them by writing them down on the conference notes provided. Look over your goal page throughout the day; it will help you keep your goals in focus.

2. Meet other people.

This is an excellent opportunity to expand your network of contacts. Sit next to someone you don't know, even if you've come with a group. Mingle during the breaks. Exchange business cards. Every participant has a specific area of expertise; find out what it is instead of chatting about the weather. Remember the goal sheet in point 1? Let us suggest that one of your goals be to meet at least one person you intend to see again on a business or social basis.

3. Participate!

Ask questions. Make contributions. Actively participate in the exercises. Consider the meeting room to be a "mental gymnasium" where it's okay to run, fall and get up again. You'll benefit much more by participating in the game than sitting on the sidelines.

4. Take Notes.

Why let even one good idea get away? Taking notes will help you concentrate and organize your thoughts. Plus, they'll allow you to take a "refresher" anytime in the future. Hint: make them clear as you write them. Few people ever have the luxury of rewriting their notes, no matter how good their intentions.

5. Relate what you learn to yourself.

Don't settle for "abstract" knowledge. Have your current problems, conflicts and interests foremost in your mind. As you learn new approaches and techniques, relate them to your own situation.

6. Find "the big idea".

Try to identify at least one "big idea" that alone will make this program worthwhile. The idea will be there... it's up to you to find it.

7. Make a commitment to review your notes.

Right now, take out your calendar and make a one hour appointment with yourself to "retake" the seminar. Don't put your good ideas away with your notes. And, consider doing it this evening while your ideas and enthusiasm are fresh.

8. Don't call the office.

There will always be a problem that "only you can handle," and in most cases it can wait. In the event of emergencies, we will interrupt the program to deliver messages.

9. Write a "Dear Boss" letter.

If your boss or company sent you to this seminar, thank them with a letter. Include a list of your "action ideas" based on your action plan - what you intend to do or change as a result of this training. If you paid your own way, still send the letter. It will show how committed you are to your own professional growth.

10. Enjoy yourself.

Start relaxed and you'll leave refreshed, inspired and recharged. Forget about what's happening at the office - unless you have unusual telepathic powers, you can't do much about it anyway. This is your day. Get all you can out of it and have a good time!



Action Plan

Don't let a good idea
get away!

Research shows that if you use an idea within 24 hours of hearing it, you are more likely to integrate it permanently. So when you hear something in the program today that you'd like to use, write it down on this page immediately. At the end of the day take this page back to your office and hang it where you can't miss it. That way you can put your action plan into action!!

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____
- 11 _____
- 12 _____
- 13 _____
- 14 _____



THE UNIVERSITY OF
ALABAMA
COLLEGE OF CONTINUING STUDIES

THE UNIVERSITY OF ALABAMA

Alabama's first university, often referred to as the Capstone, was chartered in 1819 by the State Legislature and opened its doors to its first students in 1831.

The University of Alabama's uniquely beautiful main campus covers 850 acres where over 17,000 graduate and undergraduate students select from more than 300 fully accredited degree programs offered by 17 colleges, divisions, and schools.

The institution's strong historical heritage is complemented by its commitment to teaching, research, and public service. The University of Alabama Libraries are the only institutional libraries in the state that hold membership in the prestigious Association of Research Libraries.

It is all part of a strong academic tradition that gives more than historical significance to the phrase . . . Alabama's First University.

To join the 10 a.m. or 2 p.m. tour of the campus call the Office of Admission at 348-5666.

The College of Continuing Studies is unique among The University of Alabama's academic units because its mission is the design and implementation of programs for adult learners.

From its earliest beginnings in 1918, continuing studies has sought to extend the resources of the University beyond traditional boundaries to diverse populations. Since the establishment of the college in 1983, it has built an innovative and efficient organization to meet the changing and growing needs of adult learners.

Today, the College of Continuing Studies caters to the needs of people with careers through off-campus degree programs, independent study, cooperative consultation service, professional development courses, and a wide variety of professional workshops, seminars, conferences, and institutes. Many of these programs are conducted in the College's newest facility, the Paul W. Bryant Conference Center.

THE COLLEGE OF CONTINUING STUDIES

